WISCONSIN ANNUAL SURVEY OF HOSPICES ********

This publication presents summary information from the Wisconsin Annual Survey of Hospices for 2003, and comparative data for 2002 and 2000. Wisconsin had 60 licensed hospices and 15,436 hospice patients in 2003. There were 779,296 hospice patient days during the year.

HOSPICE CHARACTERISTICS					
	<u>2003</u>	2002	2000		
• Hospices by Ownership Ty	·				
Governmental	3	3	4		
Nonprofit	50	49	50		
Proprietary	7	7	7		
All hospices	60	59	61		
• Patients by Ownership Ty	pe				
Governmental	126	92	113		
Nonprofit	12,242	10,934	9,386		
Proprietary	3,068	3,288	2,375		
All hospices	15,436	14,314	11,874		
• Hospice Patient Days	779,296	671,647	534,515		
• Number of Hospices:					
Operating a residential fac	cility 11	10	9		
Operating an inpatient fac	cility 5	5	5		
Having a contract with a	CBRF 43	45	42		
Having a contract with an	HMO 32	30	28		
Having a contract with a nursing home					
For inpatient respite s	service 9	7	17		

HOSPICE EMPLOYEES, 2003

For hospice routine care

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^{*} Includes all full-time and part-time employees, but excludes contract staff and volunteers. Data are as of December 7-13, 2003.

HOSPICE PA	TIENTS		
	<u>2003</u>	<u>2002</u>	2000
• Percent Female	55%	54%	53%
• Percent by Age			
Age 55 and younger	7%	8%	8%
Age 55 to 64	9	10	11
Age 65 and older	84	82	81
Age 85 and older	35	29	25
• Hospice Utilization Rate (Patients	per 1,000	Populatio	on)
Total Population	2.8	2.6	2.2
Female	3.1	2.8	2.3
Female 65 and older	17.4	15.7	12.3
Male	2.5	2.4	2.1
Male 65 and older	19.1	17.6	15.1
• Total Admissions	14,009	13,041	10,850
• Percent of Admissions by Primary	Pay Sour	ce	
Medicare	76%	73%	73%
Medicaid	3	3	3
Medicare/Medicaid dual entitlees	6	8	6
HMO	5	5	6
Private Insurance	8	9	11
Other	2	2	1
• Total Discharges/Deaths	13,523	12,797	10,695
• Percent of Discharges/Deaths by R	Reason		
Hospice care not appropriate	5%	5%	5%
Transferred to another hospice	2	2	2
Revocation of hospice benefit	4	5	4
Other	2	1	1
Deaths	87	88	88
• Number of Patients			
on December 31	2,337	1,910	1,505

HOSPICE PATIENTS				
	2003	<u>2002</u>	<u>2000</u>	
• Percent by Pay Source (Dec. 31)				
Medicare	77%	78%	78%	
Medicaid	3	2	2	
Medicare/Medicaid dual entitlees	11	11	8	
Private insurance	6	6	7	
Managed care/HMOs	1	2	2 3	
Self-pay and other	2	1	3	
• Percent with Selected Diagnoses				
Malignant neoplasm (cancer)	51%	55%	61%	
End-stage cardiovascular disease	15	14	11	
End-stage pulmonary disease	6	6	5	
Alzheimer's disease	7	7	5	
Amyotrophic Lateral Sclerosis (ALS)	1	<1	2	
Other	20	17	16	
• Percent of Patients by Referral Source	<u>}</u>			
Physician	35%	37%	40%	
Hospital	27	25	24	
Self-referral	2	3	2	
Patient's family	9	8	9	
Home health agency	4	5	6	
Nursing home	17	16	-	
Assisted living and other**	6	6	19	
• Percent of Patients by Living Arrangements (Dec. 31)				
Home/private residence	58%	64%	64%	
Nursing home	27	22	24	
Assisted living and other**	10	9	6	
Hospice residential facility	2	2	4	
Inpatient facility	3	3	2	
Length Of Stay For Patients Who Died Or Were Discharged***				
	2003	2002	2000	

	2003	2002	2000
Less than 7 days	31%	31%	28%
8 - 14 days	16	16	17
15 - 29 days	16	17	18
30 - 59 days	14	14	15
60 - 179 days	16	16	17
180 days and more	7	6	5
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^{**}Includes residential care apartment complexes, adult family homes, and community-based residential facilities (CBRFs).

^{***}Length-of-stay categories were changed slightly in 2003 to make them consistent with a federal survey.

ADDITIONAL INFORMATION

he source of data for these tables is the Annual Survey of Hospices, conducted by the Bureau of Health Information and Policy, Division of Public Health (DPH), Department of Health and Family Services, in cooperation with Wisconsinlicensed hospices; the Bureau of Fee-for-Service Health Care Benefits, DHCF, and the Bureau of Quality Assurance, Division of Disability and Elder Services. Wisconsin HOPE (Hospice Organization and Palliative Experts) endorsed this survey.

The 2003 survey population consisted of all 60 hospices licensed in Wisconsin. The survey instrument, prepared by the Bureau of Health Information and Policy, was mailed with the Hospice Annual Report (licensure) form in January 2004 by the Bureau of Quality Assurance. The survey utilizes a survey date of December 31; that is, hospices are asked to report some survey items (such as number of patients) as of that date. Other data items (such as the number of patient days and the number of admissions and discharges) were reported for all of calendar year 2003. Staffing information was based on the number of personnel employed by hospices during the week of Dec. 7-13, 2003. Data for 2000 and 2002 are also presented in this publication, based on surveys conducted for those years.

Hospice is a program that provides care to terminally ill persons who have a life expectancy of 6-12 months. (The patient must have a medical prognosis of 12 months or less to be eligible to receive services from a Wisconsin-licensed hospice. Medicare requires a prognosis of 6 months or less to elect the Medicare hospice benefit). "Hospice" can be an organization, a program within an organization, or a place (for details, see Wisconsin Administrative Code HFS 131).

Hospice care is significantly different in goals and emphasis from traditional medical practice. The goal of hospice care is palliative (seeking to improve patient comfort and to lessen pain and other symptoms of illness) rather than curative. It also emphasizes home care rather than institutional care, addresses the psychological, social, spiritual, and physical needs of the patient, and provides supportive services to the family. Volunteers are a unique component in hospice care.

For questions about other BHIP publications, e-mail BHIP@dhfs.state.wi.us, or write the Bureau of Health Information and Policy, P.O. Box 309, Madison WI 53701-0309. For more survey information, call Yiwu Zhang at (608) 267-7809. Health statistics are also available at http://dhfs.wisconsin.gov/provider/hospices.htm

Health Counts in Wisconsin

New Findings from the Bureau of Health Information and Policy

Hospices

2003

Division of Public Health
Department of Health and Family Services